Appendix F
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## State of South Dakota Statement of Financial Interest Candidate for Public Office

File statement in the office where your nominating petition or convention nomination certification was files. OF STATE

Please read information on reverse side before completing this form.		
1. Name Phyllis M. Heineman		
1. Name Frights M. Frememan		
2. Address 2005 S. Phillips; Sioux.	Falls, SD 5	7105
3. Office Sought State Senate		
4. What is your occupation/profession? Homemake	U/former	teacher
5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.  Williams Insurance Agency, Inc. (spouse)  Sky's the Limit, LLC (Spouse)  Sky's the Limit, LLC (Spouse)  Heineman Hospitality, LLC (Spouse)	What is the nature of you association with each? I interest need not be reported owner member	The value of the financial orted.
Heineman Properties, LC (Spouse)	member	
Herneman Hospitality, LLC (Spouse)	member	
Heineman Investments, LC (Spouse)	member	
Citibank SD (Spouse)	director	
6. List any énterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.  William's Insurance (Spouse)  Stoux Agency, LLC (Spouse)  Sky's the Limit, LLC (Spouse)  Heineman Properties LLC (Spouse)	What is the nature of you association with each? The nority owner member member member	
Heineman Investments LC (Spouse)	member	<u> </u>
Heineman Hospitality, LC (Spouse)	member	Chi Nelson
State of South Dakota		SEGRETARY OF STATE
	Verification	
County of Minnehaha) SS.	7 011110001011	
I have reviewed paragraphs 1 through 6 of the Information Rega Statement of Financial Interest and certify that the information re my financial interests for the preceding calendar year.		
(Signed)	y ruge w XX	wneman
Sworn to before me this day of		
(Seal)	Laylene Lars	20N
RAYLENE LARSON	My commission expi	Officer Administering Oath
Revised 1997 SEAL NOTARY PUBLIC	iviy commission expi	11cs